

THE EMBASSY OF THE UNITED REPUBLIC OF TANZANIA. 2139 R Street, NW Washington, DC, 20008. Tel. (202) 939.6125 and (202) 884.1080; Fax (202) 797.7408.

FOR OFFICIAL USE ONLY			VISA APPLICA	ATION FORM.		
GRR NO.			(Visa Regulations		Please Affix Passport Size	
					Photograph here.	
	1.	Surname or Family Name (Mr./Mrs./Miss/Ms/Dr./Prof.)				
		First Names in Full				
		Former or Maiden Name (if different from above)				
	Date of Birth (MM/DD/YY)Sex			M/F)		
	3. Marital Status (Mark): "Single Married ⊡Divorced ⊡Widowed □Legally Separated.					
	4.	Place of Birth Country of Birth				
		Current Nationality (State if Dual Nationality)				
	Previous Nationality					
				Place Issued		
		Valid UntilIssuing Authority				
	6.	Profession/Occupation				
		If employed, state employer				
	7.	7. Current Address				
				E-mail		
	8.	8. Proposed Date of EntryDuration of Stay				
	9. Means of Travel to Tanzania					
	10.	10. Name of Travel Agent/Tour Operator				
	11.	Contact Person(s) in Tanzania				
	Address					
	12.	2. Previous Visits to Tanzania (indicate dates and duration)				
	13.					
	14.	I4. Category of Visa applied: . Single ∷Multiple.				
	15.	. For Multiple Visa – Duration: . Three Months . Six MonthsNine Months ⊔Twelve Months				

Date__

16. Signature of Applicant_____